

BERNALILLO COUNTY
Environmental Health
111 Union Square SE, Suite 300
Albuquerque, NM 87102
Main Phone: 314-0310 Fax: 314-0470



WASTEWATER APPLICATION

Application No. _____

Receipt No. _____ Fee _____

Application Complete? Yes ☐ No ☐

Staff: _____ Date: _____

1. SITE ADDRESS (Location of wastewater system)

Site Address _____ Lot Size _____

UPC _____ Zone Atlas Page _____

Legal Description _____

2. PROPERTY OWNER

Name _____

Mailing Address _____

Phone _____ Fax _____ e-mail _____

3. APPLICANT Check here if the Property Owner and Applicant are the same ☐
Check here if you are the authorized Representative ☐

Name _____

Mailing Address: _____

Phone _____ Fax _____ e-mail _____

4. INSTALLER

Name of Company _____ Name of Contact _____

Mailing Address _____ License Number _____

Phone _____ Fax _____ e-mail _____

5. SITE EVALUATOR Check here if the Installer evaluated the site

Name of Company _____ Name of Contact _____

Mailing Address _____

Phone _____ Fax _____ e-mail _____

6. DESIGNER Check here if the Installer designed the system

Name of Company _____ Name of Contact _____

Mailing Address _____ P.E. License No. _____

Phone _____ Fax _____ e-mail _____

Phone _____ Fax _____ e-mail _____

WASTEWATER APPLICATION

APPLICATION NUMBER _____

7. DESIGN Class I Systems

Design flow _____, Septic Tank Size _____, NM# _____,

Soil Type _____, Disposal Field Type _____, Area _____

Dimensions _____, Effluent Filet _____, # of observation ports _____
Class II Systems (Attach plans and maintenance agreement)

8. SCOPE New System Modification to system: Reason _____

Please Check	Residence	Establishment*	Experimental**	Many Structures
All that Apply:	Community*	Cluster*	Custom	on a Lot

*Attach supplemental application form

**Attach experimental form

8. ATTACHMENTS

- ◆ Plans and specifications (2 copies)
- ◆ Site plan (2 copies)
- ◆ Site evaluation
- ◆ Management plan

The foregoing information and documents provided with this application are true to the best of my knowledge. I understand that the issuing of a permit based on this application does not relieve me from the responsibility of obtaining any permits required by State, County, or City regulations or ordinances or other requirements of State or Federal law.

This application expires 180 days after submission. A 180-day extension may be granted when a written request is submitted prior to the expiration of this application.

Property Owner's Signature _____ Date _____